

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555459	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/05/2024
NAME OF PROVIDER OR SUPPLIER Gramercy Court		STREET ADDRESS, CITY, STATE, ZIP CODE 2200 Gramercy Drive Sacramento, CA 95825	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0678</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide basic life support, including CPR, prior to the arrival of emergency medical personnel , subject to physician orders and the resident's advance directives.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46242</p> <p>Based on interview and record review, the facility failed to implement the cardiopulmonary resuscitation (CPR, an emergency procedure used to restart a person's heartbeat and breathing after one or both have stopped) policy for one of three sampled residents (Resident 1), when two certified nursing assistants (CNA 1 and CNA 2) provided CPR to Resident 1 without maintaining a current CPR certification.</p> <p>This failure decreased the facility's potential to provide low quality CPR for residents during emergencies.</p> <p>Findings:</p> <p>A review of Resident 1's Admission Record, dated [DATE], indicated Resident 1 was readmitted to the facility on [DATE] with diagnoses including schizoaffective disorder (a chronic mental illness that combines symptoms of schizophrenia and a mood disorder), drug abuse, and diabetes (body's inability to properly regulate blood sugar levels).</p> <p>A review of Resident 1's Admission Data Collection and Baseline Care Plan Tool, dated [DATE], indicated Resident 1's Code Status: Attempt Resuscitation - Full Code.</p> <p>A review of Resident 1's nursing progress note signed by Licensed Nurse (LN 1), dated [DATE] at 1:53 a.m., indicated, .At around 1955 [[DATE] at 7:55 p.m.] .I saw [Resident 1] in the day room sitting on a chair, shaking his hands which appears like a seizure activity . staff stated, she put [Resident 1] from the chair to the floor due to unresponsiveness and started CPR immediately until other nurses including the house supervisor from [another facility unit] arrived to the unit for assistance. CPR continued by two staff members . around 2040 Resident was transported to [hospital name] by paramedics .</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0678</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In a phone interview on [DATE] at 1:09 p.m. CNA 1 stated that during reported incident on [DATE] she was in the dining room observing Resident 1 and she was briefly called to help in another room and when she returned, Resident 1 was unresponsive and his face turned blue, she lowered him to the floor and initiated CPR while Licensed Nurse 1 (LN 1) was on the phone at the nurse's station. CNA 1 confirmed that her CPR card was expired at the time of this incident, and she did not call 911. CNA 1 stated that CNA 2 came later and briefly helped her with CPR (provided compressions) before additional nurses who came from another unit took over. CNA 1 also stated that during the most recent facility CPR training on August of 2024 she did not have a chance to practice hands-on CPR skills including compressions.</p> <p>In a phone interview on [DATE] at 1:58 p.m. CNA 2 stated that during reported incident on [DATE], she briefly assisted CNA 1 with CPR for Resident 1 (provided compressions) while LN 1 was on the phone at the nurse's station. CNA 2 confirmed that at the time of the incident she did not have a current CPR card/certificate and she did not call 911. She also confirmed that during the latest CPR training at the facility she did not have a chance to have direct hands-on CPR skills check including compressions.</p> <p>In a phone interview on [DATE] at 4:50 p.m., LN 1 stated that on the day of the reported incident on [DATE], he was placing phone calls to 911 and facility management when Resident 1 became unresponsive in the dining room and CNA 1 lowered Resident 1 on the floor from the chair and initiated CPR.</p> <p>In a phone interview on [DATE] at 1:47 p.m. with Director of Staff Development (DSD), DSD stated CNAs are supposed to call nurses for provision of CPR care. DSD further stated that CNAs should provide support to nurses during CPR, and nurses should maintain their current CPR certification. DSD confirmed that during latest facility training on CPR only nurses and not CNAs were checked on hand-on CPR skills.</p> <p>During record review, CNA 1's CPR card was reviewed and indicated renew by date of ,d+[DATE]. Copy of CPR certificate for CNA 2 was requested but was not received.</p> <p>In a phone interview on [DATE] at 10:52 a.m. with Administrator (ADM), ADM acknowledged that staff providing CPR should have current certification.</p> <p>A review of facility's policy titled Emergency Procedure - Cardiopulmonary Resuscitation, dated February 2018, indicated, Personnel have completed training on the initiation of cardiopulmonary resuscitation (CPR) and basic life support (BLS), including defibrillation, for victims of sudden cardiac arrest .If an individual (resident, visitor, or staff member) is found unresponsive and not breathing normally, a licensed staff member who is certified in CPR/BLS shall initiate CPR . If the first responder is not CPR-certified, that person will call 911 and follow the 911 operator's instructions until a CPR-certified staff member arrives.</p>		